Max Baucus, Chairman

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BAUCUS APPLAUDS SENATE PASSAGE OF INDIAN HEALTH CARE IMPROVEMENT ACT

Finance Chairman worked to include millions in Medicare, Medicaid, CHIP provisions in important bill

Washington, DC – Senate Finance Committee Chairman Max Baucus (D-Mont.) today hailed Senate passage of the Indian Health Care Improvement Act, which will fund vital health care programs for Native Americans. The bill includes provisions Baucus championed in the Finance Committee that bolster Medicare, Medicaid and the State Children's Health Insurance Program (CHIP) for Native Americans. Baucus's "Medicare, Medicaid and SCHIP Indian Health Care Improvement Act" provides \$118 million dollars to strengthen Indian health policies in programs under the panel's jurisdiction, and makes those programs more affordable and accessible to Native Americans.

"Many IHS facilities in Native communities are so cash-strapped that they're forced to turn away thousands of severely ill patients every year. This bill is the lifeline that those folks so desperately need," said Baucus. "The Indian Health Care Improvement Act will help more Native Americans see doctors, will provide health care coverage for more Native children, and will ensure more timely reimbursement for doctors in Native communities. This bill brings the promise of a healthier life to thousands of folks all across Indian Country."

The Finance provisions included in the Indian health bill strengthen outreach programs, improve reimbursement procedures, and eliminate co-payments for patients of the Indian Health Service who rely on programs under the Finance Committee's jurisdiction. The package also streamlines and updates rules and regulations that will enable federal health programs to work more effectively with the Indian Health Service.

A summary of the "Medicare, Medicaid and SCHIP Indian Health Care Improvement Act of 2007" follows here. A more detailed section-by-section of the Finance Committee package is available online at http://finance.senate.gov/sitepages/legislation.htm.

THE MEDICARE, MEDICAID, AND SCHIP INDIAN HEALTH CARE IMPROVEMENT ACT

- Facilitates Federal Payments to Indian Health Programs. Under current law, only some Indian health programs may be reimbursed by Medicaid, Medicare, and CHIP when they provide services to covered individuals. The legislation expands reimbursement to the full range of Indian health programs, including IHS facilities, Indian Tribes and Tribal Organizations.
- *Improves Medicaid and CHIP Access*. The bill improves access to Medicaid and CHIP programs for Indians residing on or near reservations by directing the Secretary of HHS to encourage States to achieve this goal using strategies like allowing program enrollment on or

near the reservation, providing program outreach and education for Indian communities, and providing translation services.

- Increases Outreach and Enrollment of Indians in CHIP and Medicaid. The legislation allows states to exceed the current cap on CHIP outreach spending to enroll Indian children.
- *Eliminates Cost-sharing and Premiums for Medicaid and CHIP*. The bill amends Medicaid and CHIP to exempt Indians from enrollment fees, premiums, deductions, co-payments, cost sharing, or similar charges for those who receive services from the Indian Health Service, an Indian Tribe, or Tribal Organization.
- Authorizes Payment for Services under Federal Health Programs. Some Indian health care providers are not currently licensed under state and local laws. Under this legislation all health care providers operated by the Indian Health Service, an Indian Tribe, Tribal Organization, or Urban Indian Organization will be considered licensed for the purpose of federal reimbursement for programs such as Medicare, Medicaid and CHIP, so long as these entities meet generally applicable standards for licensure.
- Institutes Consultation with Tribes on Federal Health Programs. The bill amends the Social Security Act to establish a Tribal Technical Advisory Group (T-TAG) to help the Secretary identify and address issues affecting Indians in federal health care programs. It also requires States to regularly consult with designees of Indian Health Programs.
- Exclusion Waiver Authority for Affected Indian Health Programs. This section protects certain healthcare-related transactions between Indian health care programs, which are often necessary as a result of the unique challenges Indian health care providers face in serving this population.
- *Modifies Medicaid Managed Care Entity Rules*. The legislation amends Medicaid's managed care rules to specify actions that States and managed care plans must take to guarantee appropriate payment for Indian health care provider services to Indians in Medicaid and CHIP.
- Creates an Annual Report on Indians Covered by Federal Health Programs. The bill requires the Secretary to submit a report to Congress regarding the enrollment and health status of Indians receiving items or services under Medicare, Medicaid and CHIP during the preceding year.